# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076 Expires: August 31, 2008 Estimated average burden hours per form......1

SEC USE ONLY							
Prefix Serial							
<u> </u>							
DATE RECEIVED							

		- 1 1 1 1							
	Name of Offering (□ check if this is an amendment and name has changed, and indicate change.)								
Purchase of Limited Partnership Interests in Gold Hill Capital 2008-C, LP (the "Partnership")									
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	<b>⊠</b> Rule 506	☐ Sec	ction 4(6) ULOE				
Type of Filing:	×	New Filing		☐ Am					
	A. BASIC II	ENTIFICATION DA	ATA		( CATIL BRIP) Incl. Select Brick Incl.				
1. Enter the information requested about	t the issuer								
Name of Issuer ( check if this is an ame	ndment and name has changed, and	indicate change.)							
Gold Hill Capital 2008-C, LP	•				08059778				
Address of Executive Offices	(Number and Street,	City, State, Zip Code)	Telephone Nun	iber (Includ	00039775				
One Almaden Blvd., Suite 620, San Jose	One Almaden Blvd., Suite 620, San Jose, CA 95113 (408) 200-7852								
Address of Principal Business Operations (if different from Executive Offices)	ber (Includin	Section Section							
		DDO	-	2					
Brief Description of Business		PRO	CESSED	47	SEK 10 TOOG				
Venture Capital Investment Fund	······································								
Type of Business Organization		SEP	1 8 2008		DC				
□ corporation	🗷 limited partnership, already i		4-40	other (p	olease Mashington, DC				
☐ business trust	☐ limited partnership, to be forme	<sup>∞</sup> THOMSC	N REUTERS						
	•	Month .	<u>Year</u>						
Actual or Estimated Date of Incorporation	or Organization:		2008	f <del>©</del> 1 <b>4</b> . 4 . −1	E Caimand				
luriediation of Incorporation or Organizati	on: (Enter two-letter U.S. Postal	Carries abbreviation	for State	🗷 Actual	☐ Estimated				
Jurisdiction of Incorporation or Organizati	CN for Canada; FN for other		or state.		DE				

## GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying or ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

# A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- ' Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General Partner of the Partnership
	t name first, if individual)				
Gold Hill Cap		10	*		
	Blvd, Suite 620, San Jose, C	1 Street, City, State, Zip Code) A 95113			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager of the General Partner
	t name first, if individual)				<del></del>
Fischer, David					•
	<del>-</del>	Street, City, State, Zip Code)			
	<del></del>	gton Street, Suite 200, Newton	n, MA 02462		
Check Boxes that Apply:	Promoter *:	Beneficial Owner	☐ Executive Officer	☐ Director	Manager of the General Partner
-	t name first, if individual)	•			
Lynden, John		O C'. C 7' O. 1.			
	sidence Address (Number and Blvd, Suite 620, San Jose, C	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager of the General Partner
Full Name (Las Tower, John F	t name first, if individual)	•			·
Business or Re	sidence Address (Number and	Street, City, State, Zip Code)			
	xecutive Park, 1221 Washin	gton Street, Suite 200, Newton	n, MA 02462		
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager of the General Partner
•	t name first, if individual)				
Business or Re		Street, City, State, Zip Code)			<del></del>
	Blvd, Suite 620, San Jose, C				
Check Boxes that Apply:	☐ Promoter	🗷 Beneficial Owner	☐ Executive Officer	☐ Director	Manager of the General Partner
·	t name first, if individual)				
	ioenfonds and its affiliates	<del></del>	·		
		Street, City, State, Zip Code) Box 75304, 1070 AH Amsterd	Iam The Netherlands		
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager of the General Partner
Full Name (Las	t name first, if individual)		•		
Business or Re	idence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Re	idence Address (Number and	d Street, City, State, Zip Code)	• .		

					_								
1.	Has the is	suer sold, or	does the issu	er intend to				_	under ULOI	 E.		Yes N	lo <u>X</u>
2.	What is the	ne minimum	investment tl	nat will be a	cepted from	n any indivi	dual?					\$	N/A
3.	Does the	offering pern	nit joint owne	rship of a si	ngle unit?	•••••	• • • • • • • • • • • • • • • • • • • •		•	*******	•••••	Yes <u>X</u> N	lo
4.	solicitation registered broker or	n of purchas with the SE	sers in conne	ection with a	sales of sec tates, list th	curities in the	ne offering. ne broker or	If a person	to be listed	is an associate	ed person or	agent of a	emuneration for broker or dealer persons of such a
Full	Name (La	st name first,	if individual	)									
Bus	iness or Re	sidence Add	ress (Number	and Street,	City, State,	Zip Code)							
Nan	ne of Asso	iated Broker	or Dealer		• •, .				<del>-</del> , , , , , , , , , , , , , , , , , , ,		····		
			ted Has Solic										
(Che	eck "All Si	ates" or chec	k individual	States)				***************************************					All States
[AL	ł	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]		[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	r <u>i</u>	[NE]	[NV]	[NH]	נמן	[NM]	[NY]	INCI	[ND]	ЮНІ	(OK)	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	ועדן	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Fuli	Name (La	st name first.	if individual	1)									
Bus	iness or Re	sidence Add	ress (Number	r and Street,	City, State,	Zip Code)							
Nan	ne of Assox	iated Broker	or Dealer				,						
Stat	es in Whic	h Person List	ted Has Solic	ited or Inten	ds to Solici	t Purchasers						· · ·	
(Ch	œk "All St	ates" or chec	k individual	States)						••••••	••••••		All States
ĮAL	.]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT		(NE)	[NV]	[HH]	[נא]	[NM]	[NY]	[NC]	[ND]	[OH]	JOKJ	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
ruli	Name (La	it name first,	if individual	.)									
Bus	iness or Re	sidence Add	ress (Number	r and Street,	City, State,	Zip Code)							
			·		•	-							
Nan	ne of Assoc	iated Broker	or Dealer							<del></del>		<del></del>	
Stat	es in Whic	ı Person List	ted Has Solic	ited or Inten	ds to Solici	t Purchasers							
(Ch	eck "All St	ites" or chec	k individual	States)	•••••	.,						•••••	All States
[AL	]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	- [GA]	[HI]	[ID]
[IL]		[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	MO
ĮΜΊ	ΓI	(NE)	[NV]	[NH]	[NJ]	INMI	[NY]	[NC]	[ND]	ЮН	OK	[OR]	[PA]

[VT]

[VA]

[VA]

 $[WV] \stackrel{:}{\to}_{k_{N}} \quad [WI]$ 

[PR]

[RI]

[SC]

[SD]

[TN]

[TX]

[UT]

	Type of Security	Aggregate		Amount Already
	•	Offering Price		Sold
	Debt	\$		\$0
	Equity	\$		<b>s</b> 0
	□ Common □ Preferred			
	Convertible Securities (including warrants)	\$50,000,000.00	ļ.	\$50,000,000.00
	Partnership Interests	\$ <u> </u>	Į.	\$0
	Other (Specify)	\$	<u> </u>	\$0
	Total	\$ 50,000,000.00	!	\$50,000,000,00
	Answer also in Appendix, Column 3, if filing under ULOE.			
o tl	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Annocato
				Aggregate
		Investors		Dollar Amount of Purchases
	Accredited Investors	2		\$50,000,000.00
	Non-accredited Investors		•	\$0
		0	-	
	Total (for filings under Rule 504 only)			\$0
	Answer also in Appendix, Column 4, if filing under ULOE.			
S	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			•
		Type of		Dollar Amount
		Security		Sold
	Type of Offering			
	Rule 505			\$0
	Regulation A		-	\$0
	Rule 504	<del></del> -	-	\$0
	Total		-	\$0
s i	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$ <u>0</u>
	Printing and Engraving Costs			\$0
	Legal Fees			\$0
	Accounting Fees			\$0
	Engineering Fees			\$0
	Sales Commissions (specify finders' fees separately)			\$0
	Other Eveneses (Identific)			•

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUMBER OF I	NVESTORS, EXPENSES AND	USE OF PROCEEDS	: ; 
b. Enter the difference between the aggregate offering price given in response to Part C – Question 4.a. This difference is the "adjusted	esponse to Part C - Question 1 and gross proceeds to the issuer"	d total expenses furnished	\$ <u>50,000,000.00</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and a payments listed must equal the adjusted gross proceeds to the issuer set	check the box to the left of the	estimate. The total of the	
	•	Payment to Officers,	Payment To
		Directors, & Affiliates	Others
Salaries and fees		□ \$ <u>0</u>	□ \$ <u>0</u>
Purchase of real estate		. so	
Purchase, rental or leasing and installation of machinery and equipment		□ so	□ so
Construction or leasing of plant buildings and facilities	***************************************	□ so	□ s <u>o</u>
Acquisition of other businesses (including the value of securities involved in		□ \$ <u>o</u>	□ s <u>o</u>
in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness			
Working capital (a portion of the Working capital will be used to pa			<b>□</b> \$ 50,000,000.00
payable to the General Partner of the Partnership, over the life of the Pa			_ +
Other (specify):		□ \$ <u>0</u>	□ s <u>o</u>
			_
Column Totals			<b>⊠</b> \$50,000,000.00
Total Payment: Listed (column totals added)			00.000,000.00
D. FED	PERAL SIGNATURE		!
The issuer had duly caused this notice to be signed by the undersigned duly	authorized person. If this notice	is filed under Rule 505, the	following cionature constitute
an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
Gold Hill Capital 2008-C, LP	MA		September 2, 2008
Name of Signer (Print or Type)	Title of Signer (Printer Type)		
John Rosi Lynden, IV	Manager of Gold Hill Capits 2008-C, LP	al 2008, LLC the General	Partner of Gold Hill Capita
			·
<i>₽</i> ~			
	•		
•			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqual	ification provisions of such rule?	Yes	No 🗷				
	See Appendix, Column	1 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to the state administrator such times as required by state law.	of any state in which the notice is filed, a notice on Form D	(17 CFR 23	19.500) at				
3.	The undersigned issuer hereby undertakes to furnish to any state administrators,	upon written request, information furnished by the issuer to of	ferces.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	sissuer has read this notification and knows the contents to be true and has dul son.	y caused this notice to be signed on its behalf by the undersi	gned duly a	uthorized				
Issı	er (Print or Type) Sig	gnatu/e//	Date					
Go	d Hill Capital 2008-C, LP	September						
Naı	me (Print or Type) Tit	ile (Print or Type)						
J	UNA 1503 PATTOWN I	anager of Gold Hill Capital 2008, LLC the General Papital 2008-C, LP	artner of (	Gold Hill				

E. STATE SIGNATURE



#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.